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ABSTRACT

This document considers the problems faced by the children and adolescents who were affected by the 1986 accident at the Chernobyl nuclear power plant in the Ukraine. It discusses problems with psycho-physical, social, and spiritual development. It is noted that the Chernobyl children do not form a homogeneous population, but can be divided into at least nine groups: (1) former residents within the 30-kilometer zone who were forced to evacuate their homes because of radiation; (2) residents outside the 30-kilometer zone who were forced to evacuate because of contamination; (3) residents of sites who will be evacuated when suitable locations are available; (4) residents of areas undergoing permanent radiation monitoring; (5) residents in nearby "safe regions"; (6) children born after Chernobyl to parents who participated in clean-up; (7) children born to persons who had been classified in categories one through five; (8) children from other parts of the Ukraine who consumed contaminated food; and (9) children born in 1986, the year of the Chernobyl accident who suffered from radiation. Research needs are considered and a number of obstacles to the healthy development of these children are enumerated. Other aspects of dealing with the social-psychological consequences of the Chernobyl catastrophe are considered and the responsibilities of rehabilitation centers that will be established by the Ukraine Psychological Research Institute are outlined. (NB)

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PSYCHOLOGICAL AID TO THE CHILDREN WHO SUFFERED FROM THE CHERNOBYL CATASTROPHE

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ABSTRACT

Chernobyl children and adolescents suffer from three categories of dysfunctional development: psycho-physical, social, and spiritual. Children are divided according to received dose of radiation. Obstacles to treatment issues surrounding their rehabilitation are discussed. Rehabilitation centers which will be established by the Ukraine Psychological Research Institute are outlined.

The Chernobyl disaster caused catastrophic changes, not only in terms of the contamination of the ecological environment, but, also in radical changes of the traditional ways in which they approached their lives. The accident caused people to reassess value systems and sometimes change their attitudes toward the environment, society, health, and the rearing of children. From the research generated by the Ukrainian Psychological Research Institute located at Kiev State University it is evident that the children of the disaster suffered tremendously.

According to Baryahtar and Bobyleva (1991), studies of children and adolescents affected by the catastrophe conclude there are problems with physical development, including the slowing of physical maturity, loss of strength, deficient physical vitality, and an increase in the number of illnesses and disease. Results of research have been categorized by the Institute as falling in the psycho-physical, social, and spiritual spheres.

1. Psycho-physical development - inability to adapt to stress, problems with memory, lack of motivation, poor self esteem, fixation upon negative experiences, lowered capacity for both physical and mental work, nostalgia, a mistrust of the future, and helplessness.

2. Social development - increase in aggressiveness marked by bipoplar conflicts and social apathy, and problems in communication and peer understanding, especially for evacuated children because of medical problems associated with living in radiologically contaminated areas.

3. Spiritual development - existential crisis,

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difficulties in personal and professional self definition, development of a "victimization complex", and fixation upon being condemned to a short, hard, and worthless life.

The Chernobyl children do not form a homogeneous population. They may be divided into at least nine groups which differ by size, location, and correlation with psychotraumatic factors. These groups are as follows:

1) children and adolescents, former residents within the 30 kilometer zone constructed around the Chernobyl reactor site, who were forced to evacuate because of increased radiation;

2) children and adolescents living in other places who were forced by the government to evacuate because of high levels of contamination;

3) children and adolescents currently residing in sites of "guaranteed evacuation" that will be moved as soon as suitable locations become available;

4) children and adolescents living in areas undergoing permanent radiation monitoring because of fallout;

5) children and adolscents residing in "safe regions" adjacent to the Chernobyl site, however, they received no radiation due to wind direction and rainfall;

6) children born after Chernobyl to parents who participated in the clean-up efforts;

7) children born to those classified above as they became maturing adults;

8) children from other parts of the Ukraine who consumed contaminated food and are undergoing radiological monitoring;

9) children born in 1986, the year of the Chernobyl accident who suffered from radiation.

According to Awramenko (1992), the government recognizes that victims of the Chernobyl disaster need guaranted services, however, daily the list of those requesting services grows as newly discovered victims are added. The Institute cites a lack of social-psychological expertise in classification and the government's lack of sound policies as a reason for this oversight.

There are several research problems which need to be addressed in order to organize any approach for the social-psychological rehabilitation of the Chernobyl children. identification of research parameters requires knowledge of:

a) the factors and conditions caused by the Chernobyl catastrophe which interfere with the healthy development of children and adolescents. Correlation between these factors, the disaster zones, and children's health will have to be studied.

b) the interaction between these factors and the mental development of children at different ages, and in different regions of the Ukraine, will have to be researched longitudinally.

c) the present condition and life-span development of children, particularly in the Chernobyl zone, needs to be addressed, as well as indentification of techniques for counseling these children.

As defined by the Yakovlev (1992), these are the main obstacles to the healthy development of children.

1) Children, born in 1986, suffer internal and external radiation tissue damage, however, these do not mirror the research from Hiroshima because the doses received as a result of Chernobyl were low and effects were protracted.

2) The scarcity of medical services in the affected regions of the Ukraine.

3) Poor reliability concerning levels of radioactivity, security measures, health conditions, and access to, and reliability of, scientific research data.

4) Mass media distortion of the Chernobyl catastrophe which takes the form of disinformation resulting rumors which circulate among people causing anxiety and stress.

5) Demographic changes in the contaminated zones caused by migration of educated people and massive immigration of those with less education who move into the area claiming to be Chernobyl victims seeking government support.

6) Disruptions of family relationships with long separations during the vacation times when children are sent to rehabilitation camps and the impossibility of continuing the traditional kinds of leisure and home activities.

7) Schools within the contaminated zone lack space for dining rooms, gymnasiums, and equipment and they lack qualified teachers.

8) The ineffectiveness of the social-psychological rehabilitation of children during the rehabiliation

vacations and lack of continued rehabilitation during the school year.

9) The lack of resources for people who suffered from the catastrophe coupled with the lack of problem awareness on the part of local administrators which mirrors a lack of knowledge and attention to the problem from the world community.

Other aspects of dealing with the social-psychological consequences of the Chernobyl catastrophe which must also be considered are:

a) the impossiblity of providing aid to all the people that suffered from the catastrophe with assistance with living conditions, qualified medical help, opportunity for adequate work, and in some cases financial compensation.

b) social tensions caused by inequitable distributions of government assistance and humanitarian assistance.

c) a mistrust of government administration, the mass media, scientists, and experts addressing the problems of Chernobyl.

d) the people are limited in their ability to solve their problems by themselves and there is a lack of governmental, social-psychological programs, and legal/legislative aid to assist their efforts.

e) many problems with no coordinated mechanism for providing help to the people who suffered most.

The Ukrainian Psychological Research Institute plans further longitudinal research creating a scientific base, and trained personnel, to provide the necessary psychological aid to children and adolescents affected by the catastrophe. One plan is to create a network of psychological aid centers. The centers will have as goals:

1) ensuring help is accessible.

2) implementing differentiated approaches to children according to age grouping and radiation exposure.

3) effectively managing the complexity of approaches.

4) when assistance is given, providing for what is necessary and sufficient for the persons' needs.

5) giving continuous social-psychological assistance for the on-going development of a healthy personality.

There exists a serious lack of qualified professionals for

rendering such help while the number of people who need assistance increases. The strategy of rendering the social-psychological help must include, according to Barahtar and Bobyleva (1991):

a) governmental responses which must include empirical, valid, and reliable measures that are designed for the positive development of children in the Chernobyl catastrophe zone. These measures should be coupled with humanitarian measures to ensure that all decisions concerning the medical treatment, education, and leisure activites of children keep the welfare of the child foremost with school and after-school organizations needing to coordinate their activities.

b) the creation of a network or regional assistance centers where help can be coordinated.

c) the initiation and support of public organizations which encourages self support among individuals.

Psychological assistance is defined as a process of determining goals and means of reaching them, including evaluation of the effect of these activities. The effectiveness of this assistance depends upon the treatment conditions, and, in the therapeutic process, the involvement and motivation of clients, as well as the qualifications of the therapist.

The Ukrainian Psychological Research Institute, with all of its equipment, has been created to aid in solving the many issues of the Chernobyl catastrophe. A program for a network of centers has also been proposed to the Chernobyl Ministry of Ukraine. If approved, personnel for these centers will be trained. In the Kiev region, the first such Center is located in the town of Wisknevy and is constructed with the help of UNESCO and the Chernobyl Ministry. The plan calls for foreign experts in psychological rehabilitation to participate in personnel training.

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